

FROM : LAW OFFICE OF GEORGE W. FINCH PHONE NO. : 310+315 8210

Mar. 30 2001 04:28PM P2

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PTO/SB01 (12-97)

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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.53)		Attorney Docket Number	SOFT-0006A
		First Named Inventor	UDELL et al.
		COMPLETE IF KNOWN	
		Application Number	/
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.18 (a)) (required)		Filing Date	3 April 2001
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I declare that I am the original, first and sole inventor (if plural names are listed below of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COROSOLIC ACID FORMULATION AND ITS APPLICATION FOR WEIGHT-LOSS MANAGEMENT AND BLOOD SUGAR BALANCE

the specification of which

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understood the contents of the above identified specification, including the claims, as amended by any amendments specifically referred to above.

I acknowledge that I am a citizen of the United States and that I am not a resident of a foreign country as defined in 37 CFR 1.55.

I hereby certify that I am the original inventor of the invention entitled "COROSOLIC ACID FORMULATION AND ITS APPLICATION FOR WEIGHT-LOSS MANAGEMENT AND BLOOD SUGAR BALANCE" and that I am the first and sole inventor of the invention entitled "COROSOLIC ACID FORMULATION AND ITS APPLICATION FOR WEIGHT-LOSS MANAGEMENT AND BLOOD SUGAR BALANCE" and that I am the first and sole inventor of the invention entitled "COROSOLIC ACID FORMULATION AND ITS APPLICATION FOR WEIGHT-LOSS MANAGEMENT AND BLOOD SUGAR BALANCE".

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(a)-(d) or 365(c) of any foreign application(s) for patent or inventor's certificate, or PCT international application which designates or claims the United States of America, filed on or after the date indicated below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date later than that of the application on which priority is claimed:

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/194,913	5 April 2001	<input type="checkbox"/>

(Page 1 of 2)

Warning: Your Signature. This form is submitted to the PTO and is subject to review. This will vary depending upon the needs of the individual case. Any comments or the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

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Mar. 30 2001 04:28PM P3

Patent type is new (1) known (0) ☐

PTO/SB/01 (12-97)

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s) or 35 U.S.C. 121 of any PCT International application designating the United States of America, filed herein and, either at the subject matter of each of the claims of this Application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.54 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are placed on a supplemental priority data sheet PTO/SB/02A attached hereto.

As a named inventor, I hereby represent the following required information to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number 24046	<input type="checkbox"/> OR	<input checked="" type="checkbox"/> Registered practitioner's communication number listed below	
Name	Registration Number	Name	Registration Number
George W. Finch	25,113		

☐ Additional registered practitioner's names and supplemental information are provided on supplemental information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label 24046 ☐ OR ☒ Correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that false statements and the like so made are punishable by law or perjury, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unnamed inventor	
Given Name (first and middle if any)		Family Name or Surname	
Ronald G.		WELL	
Inventor's Signature	Date		4/2/01
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Post Office Address			
City	Beverly Hills	State	CA
Zip	90212	Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
SIVA P.				HARI			
Inventor's Signature				Date	4/3/01		
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence City		State		Country			Citizenship
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence City		State		Country			Citizenship
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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